SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page

FC	OR L	PAGE	7	74	OF	13	115			
(check only one)										
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	ny information copied from such Reports and Stator commercial purposes, other than using the							
	NAME OF COMMITTEE (In Full) REPUBLICAN NATIONAL COM	MITTEE						
Α.	Full Name of Individual (Last, First, Middle Initi-BLACKWELL, KATHLEEN, , ,	Date of Receipt						
	Mailing Address 1501 RIDGECREST DR.	05 04 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y						
	City	State	Zip Code	Transaction ID : SA11A.109464849				
	AUSTIN	TX	78746-2218	_ Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		50.00				
	Name of Employer (for Individual)	Occup	pation (for Individual)	Memo Item				
	SELF-EMPLOYED	SELF	-EMPLOYED	CONTRIBUTION				
	Receipt For: Primary General Other (specify) ▼	Aggregate Y	ear-to-Date ▼	EARMARKED FROM WINRED				
В.	Full Name of Individual (Last, First, Middle Initi BLANCHARD, JAMES, H., MR.,	Date of Receipt						
	Mailing Address 6001 RIVER ROAD SUITE 100		I	05 04 7 2021				
	City	State	Zip Code	Transaction ID : SA11A.109464723				
	COLUMBUS	GA	31904-2949	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		50.00				
	Name of Employer (for Individual) RETIRED	Occup RETII	pation (for Individual) RED	Memo Item CONTRIBUTION				
	Receipt For:	Aggregate Y	ear-to-Date ▼					
	Primary General Other (specify) ▼		530.00	EARMARKED FROM WINRED				
<u> </u>	Full Name of Individual (Last, First, Middle Initi	Date of Receipt						
	Mailing Address 6550 NORTHWEST 48TH TER	05 04 2021						
	City	State	Zip Code	Transaction ID : SA11A.109465181				
	OCALA	FL	34482-7642	Amount of Each Receipt this Period				
	FEC ID number of contributing federal political committee.	С		100.00				
	Name of Employer (for Individual) AAA COOPER		pation (for Individual)	Memo Item CONTRIBUTION				
	Receipt For:			-				
	Primary General Other (specify)		ear-to-Date ▼	EARMARKED FROM WINRED				
H	SUBTOTAL of Receipts This Page (optional)			200.00				
I T	OTAL This Period (last page this line number o	nly)						